1040		rtment of the Treasury—Internal Revenue I. Individual Income Tax Revenue		200	3	(99) IF	S Use O	nlv—Do no	t write or	staple in this space.	
		the year Jan. 1-Dec. 31, 2003, or other tax year be		,:	2003, end	, ,	, 2			MB No. 1545-0074	1
Label	-	ur first name and initial	Last na			<u> </u>		-		ocial security num	
(See L								;			
instructions B		joint return, spouse's first name and initial	Last na	ime					Spouse	e's social security	number
on page 19.) E								! ! !			
label. H	Но	me address (number and street). If you have	a P.O. bo	x, see page	19.		Apt. no.			Important!	
Otherwise, please print R				You must enter							
or type.	Cit	y, town or post office, state, and ZIP code. I	your SSN(s) above.								
Presidential		N				6 1			You	ı Spou	se
Election Campaign (See page 19.)	n	Note. Checking "Yes" will not change Do you, or your spouse if filing a joint						•	Yes		□No
(Occ page 17.)	1 [Single	. rotarr, t	vant 40 to	4	_	oucobo	ld (with c		person). (See pag	
Filing Status	2	SingleMarried filing jointly (even if only on	e had inc	rome)	4					not your depender	
Check only	3	Married filing separately. Enter spot				this child			Jima Sat	not your dopondo	, σσ.
one box.		and full name here. ▶		- 42070	5	Qualifyin	g widov	v(er) with	depend	dent child. (See pa	age 20.)
	6a	Yourself. If your parent (or some		can claim	you as	a depende	ent on h	nis or he	r tax	No. of boxes checked on	
Exemptions		return, do not check be	ox 6a						}	6a and 6b	
	b	Spouse				(3) Depend	lent's	(4) If qual	ifving	No. of children on 6c who:	
	С	Dependents:		(2) Dependent al security nui		relationsh	ip to	child for chi	ld tax	lived with you	
		(1) First name Last name		1 1		you	C	redit (see pa	ige 21)	 did not live with you due to divorce 	
If more than five			+	1 1						or separation	
dependents, see page 21.			_	1 1						(see page 21) Dependents on 6c	
see page 21.										not entered above	
										Add numbers on lines	
	d	Total number of exemptions claimed		<u></u>						above ►	<u> </u>
Incomo	7	Wages, salaries, tips, etc. Attach Form	m(s) W-2						7		
Income	8a	Taxable interest. Attach Schedule B	•						8a		
Attach	b	Tax-exempt interest. Do not include							9a		
Forms W-2 and W-2G here.	9a	Ordinary dividends. Attach Schedule			1 .	,			//////		
Also attach	b 10	Qualified dividends (see page 23) . Taxable refunds, credits, or offsets of					ado 33	\	10		
Form(s) 1099-R if tax was	11	Alimony received	11								
withheld.	12	Business income or (loss). Attach Sch	12								
	13a	Capital gain or (loss). Attach Schedule	e D if req	juired. If no	t requi	red, check	here I	▶ □	13a		
	b	If box on 13a is checked, enter post-May 5 c	apital gain	distributions	131	b					
If you did not	14	Other gains or (losses). Attach Form	4797 .	. , . ,					14		
get a W-2, see page 22.	15a	IRA distributions 15a				able amount		•	15b		
	16a	Pensions and annuities 16a				able amount		-	16b		
Enclose, but do not attach, any	17 18	Rental real estate, royalties, partnersh Farm income or (loss). Attach Schedu	•	•					18		
payment. Also,	19								19		
please use Form 1040-V.	20a	Social security benefits . 20a				able amount			20b		
	21	Other income. List type and amount (27)					21	_	
	22	Add the amounts in the far right column	n for lines	7 through	21. This	s is your to	tal inco	me 🕨	22		
Adjusted	23	Educator expenses (see page 29) .									
Gross	24	IRA deduction (see page 29)									
Income	25	Student loan interest deduction (see									
meeme	26 27	Tuition and fees deduction (see page Moving expenses. Attach Form 3903									
	28	One-half of self-employment tax. Atta									
	29	Self-employed health insurance deduction									
	30	Self-employed SEP, SIMPLE, and qua		· -	20)					
	31	Penalty on early withdrawal of saving	s								
	32a	Alimony paid b Recipient's SSN ▶			32						
	33	Add lines 23 through 32a Subtract line 33 from line 22. This is v							33		+
	34	Subtract line 33 HOIH line ZZ. HIIS IS	your ault	13160 GIUS	o micul	HC			34		

Form 1040 (2003)					Page 2
Tax and	35	Amount from line 34 (adjusted gross income)			35
Credits	36a	Check \int You were born before January 2, 193	, 🔲 Blind. 🕽 Total boxe	s	
Standard		if: $\int \Box$ Spouse was born before January 2, 1	939, 🔲 Blind. 🕽 checked	➤ 36a	
Deduction	b	If you are married filing separately and your spouse		_	
for—		you were a dual-status alien, see page 34 and che			27
 People who checked any 	37	Itemized deductions (from Schedule A) or your st			37 38
box on line 36a or 36b or	38	Subtract line 37 from line 35			
who can be	39	If line 35 is \$104,625 or less, multiply \$3,050 by the line 6d. If line 35 is over \$104,625, see the worksh			39
claimed as a dependent,	40	Taxable income. Subtract line 39 from line 38. If li			40
see page 34.	41	Tax (see page 36). Check if any tax is from: a Form		-	41
All others:	42	Alternative minimum tax (see page 38). Attach Fo	m 6251		42
Single or Married filing	43	Add lines 41 and 42			43
separately, \$4,750	44	Foreign tax credit. Attach Form 1116 if required .	4=		
Married filing	45	Credit for child and dependent care expenses. Attach			
jointly or Qualifying	46	Credit for the elderly or the disabled. Attach Sched	47		
widow(er),	47 48	Education credits. Attach Form 8863			
\$9,500	46 49	Retirement savings contributions credit. Attach For Child tax credit (see page 40)	10000 .		
Head of household,	50	Adoption credit. Attach Form 8839			
\$7,000	51	Credits from: a Form 8396 b Form 88	9 51		
	52	Other credits. Check applicable box(es): a			
		b Form 8801 c Specify			
	53 54	Add lines 44 through 52. These are your total cred			53
		Subtract line 53 from line 43. If line 53 is more tha			55
Other	55 56	Self-employment tax. Attach Schedule SE			56
Taxes	57	Tax on qualified plans, including IRAs, and other tax-favor	57		
	58	Advance earned income credit payments from Form		•	58
	59	Household employment taxes. Attach Schedule H			59
	60	Add lines 54 through 59. This is your total tax		<u> ▶</u>	60
Payments	61	Federal income tax withheld from Forms W-2 and			
	62	2003 estimated tax payments and amount applied from 2003			
If you have a qualifying	63	Earned income credit (EIC)			
child, attach Schedule EIC.	65	Additional child tax credit. Attach Form 8812	page 30)		
00.1044.5	66	Amount paid with request for extension to file (see			
	67	Other payments from: a \square Form 2439 b \square Form 4136 c \square	orm 8885 67		
	68	Add lines 61 through 67. These are your total pays	nents	•	68
Refund	69	If line 68 is more than line 60, subtract line 60 from		ou overpaid	69
Direct deposit? See page 56	70a	Amount of line 69 you want refunded to you	_	▶	70a
and fill in 70b,	► b ► d	Routing number Account number	c Type: Checking	Savings	
70c, and 70d.	71	Amount of line 69 you want applied to your 2004 estimate	ed tax		
Amount	72	Amount you owe. Subtract line 68 from line 60. For	•	page 57 ▶	72
You Owe	73	Estimated tax penalty (see page 58)			<u> </u>
Third Party	Do	you want to allow another person to discuss this ret	rn with the IRS (see page 58	8)? Yes .	Complete the following. No
Designee	Des	signee's Phone no. □		Personal identifi number (PIN)	cation
Sign	Und	ler penalties of perjury, I declare that I have examined this reture, they are true, correct, and complete. Declaration of preparer	and accompanying schedules ar	nd statements, ar	nd to the best of my knowledge and
Here			Your occupation	i illioittiatioti oi w	Daytime phone number
Joint return? See page 20.	100	ır signature Date	Tour occupation		baytime phone number
Кеер а сору	Spo	buse's signature. If a joint return, both must sign. Date	Spouse's occupation		
for your records.			<u> </u>		
Paid		parer's	Date	eck if	Preparer's SSN or PTIN
Preparer's		nature		-employed 🔲	<u> </u>
Use Only	you	n's name (or rs if self-employed),		EIN	!
<u>-</u>	ado	lress, and ZIP code 🖊		Phone no.	() Form 1040 (2003)
					101111 1070 (2003)

Form 3903

Moving Expenses

Department of the Treasury Internal Revenue Service

Name(s) shown on Form 1040

► Attach to Form 1040.

OMB No. 1545-0062

2003
Attachment
Sequence No. 62

Your social security number

Before you begin: / See the Distance Test and Time Test in the instructions to find out if you can deduct your moving expenses. \(\text{If you are a member of the armed forces, see the instructions to find out how to complete this form. Enter the amount you paid for transportation and storage of household goods and personal 1 Enter the amount you paid for travel and lodging in moving from your old home to your new 2 home (see instructions). **Do not** include the cost of meals Add lines 1 and 2 3 Enter the total amount your employer paid you for the expenses listed on lines 1 and 2 that is not included in the wages box (box 1) of your Form W-2. This amount should be identified with Is line 3 more than line 4? ☐ No. You cannot deduct your moving expenses. If line 3 is less than line 4, subtract line 3. from line 4 and include the result on Form 1040, line 7. Yes. Moving expense deduction. Subtract line 4 from line 3. Enter the result here and on Form 1040, line 27 5 If you qualify to deduct expenses for **Distance Test** General Instructions more than one move, use a separate Form Your new principal workplace must be at 3903 for each move. A Change To Note least 50 miles farther from your old home For more details, see Pub. 521, Moving than your old workplace was. For example, Expenses. For 2003, the standard mileage rate for if your old workplace was 3 miles from using your vehicle to move to a new home your old home, your new workplace must is 12 cents a mile. Who May Deduct Moving be at least 53 miles from that home. If you did not have an old workplace, your new **Expenses** workplace must be at least 50 miles from Purpose of Form your old home. The distance between the If you move to a new home because of a Use Form 3903 to figure your moving two points is the shortest of the more new principal workplace, you may be able expense deduction for a move related to commonly traveled routes between them. to deduct your moving expenses whether the start of work at a new principal place you are self-employed or an employee. But of work (workplace). If the new workplace To see if you meet the you must meet both the distance test and is outside the United States or its time test that follow. distance test, you can possessions, you must be a U.S. citizen or use the worksheet resident alien to deduct your expenses. below.

Distance Test Worksheet

Keep a Copy for Your Records

		Troop a copy for four troops	•
TIP	Members of the armed forces may not have to meet this test. For details, see the instructions on the back of this form.		
1. Enter t	he number of miles from your old home to your new workplace	1miles	
2. Enter t	he number of miles from your old home to your old workplace	2. <u>miles</u>	
3. Subtra	ct line 2 from line 1. If zero or less, enter -0	3miles	
☐ Ye	3 at least 50 miles? s. You meet this test You do not meet this test. You cannot deduct your moving expenses. Do not complete F	Form 3903.	

													200	JO IAX	Table	-Cont	iriueu
If line 4 (taxable income	•		And yo	ou are—	-	If line (taxab incom			And yo	And you are—		If line (taxal incom		And you are—			
At least	But less than	Single	Married filing jointly *	Married filing sepa- rately	Head of a house- hold	At least	But less than	Single	Married filing jointly	Married filing sepa- rately	Head of a house- hold	At least	But less than	Single	Married filing jointly	filing sepa- rately	Head of a house- hold
			Your t	ax is—					Your t	ax is—					Your	tax is—	
23,	000					26,	000	<u> </u>				29,	,000	I			
23,000 23,050 23,100 23,150 23,200 23,250 23,300	23,100 23,150 23,200 23,250 23,300	3,104 3,111 3,119 3,126 3,134 3,141 3,149	2,754 2,761 2,769 2,776 2,784 2,791 2,799	3,104 3,111 3,119 3,126 3,134 3,141 3,149	2,954 2,961 2,969 2,976 2,984 2,991 2,999	26,000 26,050 26,100 26,150 26,200 26,250 26,300	26,100 26,150 26,200 26,250 26,300 26,350	3,554 3,561 3,569 3,576 3,584 3,591 3,599	3,204 3,211 3,219 3,226 3,234 3,241 3,249	3,554 3,561 3,569 3,576 3,584 3,591 3,599	3,404 3,411 3,419 3,426 3,434 3,441 3,449	29,000 29,050 29,100 29,150 29,200 29,250 29,300	29,050 29,100 29,150 29,200 29,250 29,300 29,350	4,066 4,079 4,091 4,104 4,116 4,129 4,141	3,654 3,661 3,669 3,676 3,684 3,691 3,699	4,066 4,079 4,091 4,104 4,116 4,129 4,141	3,854 3,861 3,869 3,876 3,884 3,891 3,899
23,350 23,400 23,450 23,500 23,550	23,450 23,500 23,550 23,600	3,156 3,164 3,171 3,179 3,186	2,806 2,814 2,821 2,829 2,836	3,156 3,164 3,171 3,179 3,186	3,006 3,014 3,021 3,029 3,036	26,350 26,400 26,450 26,500 26,550	26,400 26,450 26,500 26,550 26,600	3,606 3,614 3,621 3,629 3,636	3,256 3,264 3,271 3,279 3,286	3,606 3,614 3,621 3,629 3,636	3,456 3,464 3,471 3,479 3,486	29,350 29,400 29,450 29,500 29,550	29,400 29,450 29,500 29,550 29,600	4,154 4,166 4,179 4,191 4,204	3,706 3,714 3,721 3,729 3,736	4,154 4,166 4,179 4,191 4,204	3,906 3,914 3,921 3,929 3,936
23,600 23,650 23,700 23,750 23,800		3,194 3,201 3,209 3,216 3,224	2,844 2,851 2,859 2,866 2,874	3,194 3,201 3,209 3,216 3,224	3,044 3,051 3,059 3,066 3,074	26,600 26,650 26,700 26,750 26,800	26,650 26,700 26,750 26,800 26,850	3,644 3,651 3,659 3,666 3,674	3,294 3,301 3,309 3,316 3,324	3,644 3,651 3,659 3,666 3,674	3,494 3,501 3,509 3,516 3,524	29,600 29,650 29,700 29,750 29,800	29,650 29,700 29,750 29,800 29,850	4,216 4,229 4,241 4,254 4,266	3,744 3,751 3,759 3,766 3,774	4,216 4,229 4,241 4,254 4,266	3,944 3,951 3,959 3,966 3,974
23,850 23,900 23,950	23,900 23,950 24,000	3,231 3,239 3,246	2,881 2,889 2,896	3,231 3,239 3,246	3,081 3,089 3,096	26,850 26,900 26,950	26,900 26,950 27,000	3,681 3,689 3,696	3,331 3,339 3,346	3,681 3,689 3,696	3,531 3,539 3,546	29,850 29,900 29,950	29,900 29,950 30,000	4,279 4,291 4,304	3,781 3,789 3,796	4,279 4,291 4,304	3,981 3,989 3,996
24,	000					27,	000					30,	,000				
24,000 24,050 24,100 24,150	24,150 24,200	3,254 3,261 3,269 3,276	2,904 2,911 2,919 2,926	3,254 3,261 3,269 3,276	3,104 3,111 3,119 3,126	27,050 27,100 27,150	27,200	3,704 3,711 3,719 3,726	3,354 3,361 3,369 3,376	3,704 3,711 3,719 3,726	3,554 3,561 3,569 3,576	30,000 30,050 30,100 30,150	30,050 30,100 30,150 30,200	4,316 4,329 4,341 4,354	3,804 3,811 3,819 3,826	4,316 4,329 4,341 4,354	4,004 4,011 4,019 4,026
24,200 24,250 24,300 24,350	24,300 24,350 24,400	3,284 3,291 3,299 3,306	2,934 2,941 2,949 2,956	3,284 3,291 3,299 3,306	3,134 3,141 3,149 3,156	27,200 27,250 27,300 27,350	27,300 27,350 27,400	3,734 3,741 3,749 3,756	3,384 3,391 3,399 3,406	3,734 3,741 3,749 3,756	3,584 3,591 3,599 3,606	30,200 30,250 30,300 30,350	30,250 30,300 30,350 30,400	4,366 4,379 4,391 4,404	3,834 3,841 3,849 3,856	4,366 4,379 4,391 4,404	4,034 4,041 4,049 4,056
24,400 24,450 24,500 24,550	24,550 24,600	3,314 3,321 3,329 3,336	2,964 2,971 2,979 2,986	3,314 3,321 3,329 3,336	3,164 3,171 3,179 3,186	27,400 27,450 27,500 27,550	27,450 27,500 27,550 27,600	3,764 3,771 3,779 3,786	3,414 3,421 3,429 3,436	3,764 3,771 3,779 3,786	3,614 3,621 3,629 3,636	30,400 30,450 30,500 30,550	30,450 30,500 30,550 30,600	4,416 4,429 4,441 4,454	3,864 3,871 3,879 3,886	4,416 4,429 4,441 4,454	4,064 4,071 4,079 4,086
24,600 24,650 24,700 24,750	24,800	3,344 3,351 3,359 3,366	2,994 3,001 3,009 3,016	3,344 3,351 3,359 3,366	3,194 3,201 3,209 3,216	27,600 27,650 27,700 27,750	27,650 27,700 27,750 27,800	3,794 3,801 3,809 3,816	3,444 3,451 3,459 3,466	3,794 3,801 3,809 3,816	3,644 3,651 3,659 3,666	30,600 30,650 30,700 30,750	30,650 30,700 30,750 30,800	4,466 4,479 4,491 4,504	3,894 3,901 3,909 3,916	4,466 4,479 4,491 4,504	4,094 4,101 4,109 4,116
	24,950 25,000	3,374 3,381 3,389 3,396	3,024 3,031 3,039 3,046	3,374 3,381 3,389 3,396	3,224 3,231 3,239 3,246		27,850 27,900 27,950 28,000	3,824 3,831 3,839 3,846	3,474 3,481 3,489 3,496	3,824 3,831 3,839 3,846	3,674 3,681 3,689 3,696	- 	31,000	4,516 4,529 4,541 4,554	3,924 3,931 3,939 3,946	4,516 4,529 4,541 4,554	4,124 4,131 4,139 4,146
25,	,000					28,	000					31,	,000				
25,050 25,100 25,150	25,200	3,404 3,411 <mark>3,419</mark> 3,426	3,054 3,061 3,069 3,076	3,404 3,411 3,419 3,426	3,254 3,261 3,269 3,276	28,050 28,100 28,150	28,200	3,854 3,861 3,869 3,876	3,504 3,511 3,519 3,526	3,854 3,861 3,869 3,876	3,704 3,711 3,719 3,726	31,000 31,050 31,100 31,150		4,566 4,579 4,591 4,604	3,954 3,961 3,969 3,976	4,566 4,579 4,591 4,604	4,154 4,161 4,169 4,176
	25,300 25,350 25,400	3,434 3,441 3,449 3,456	3,084 3,091 3,099 3,106	3,434 3,441 3,449 3,456	3,284 3,291 3,299 3,306	28,200 28,250 28,300 28,350	28,300 28,350 28,400	3,884 3,891 3,899 3,906	3,534 3,541 3,549 3,556	3,884 3,891 3,899 3,906	3,734 3,741 3,749 3,756	31,200 31,250 31,300 31,350	31,250 31,300 31,350 31,400	4,616 4,629 4,641 4,654	3,984 3,991 3,999 4,006	4,616 4,629 4,641 4,654	4,184 4,191 4,199 4,206
25,400 25,450 25,500 25,550	25,500 25,550 25,600	3,464 3,471 3,479 3,486	3,114 3,121 3,129 3,136	3,464 3,471 3,479 3,486	3,314 3,321 3,329 3,336 3,344	28,400 28,450 28,500 28,550	28,550 28,600	3,916 3,929 3,941 3,954	3,564 3,571 3,579 3,586	3,916 3,929 3,941 3,954	3,764 3,771 3,779 3,786	31,400 31,450 31,500 31,550	31,450 31,500 31,550 31,600	4,666 4,679 4,691 4,704	4,014 4,021 4,029 4,036	4,666 4,679 4,691 4,704	4,214 4,221 4,229 4,236
25,600 25,650 25,700 25,750	25,700 25,750 25,800	3,494 3,501 3,509 3,516	3,144 3,151 3,159 3,166	3,494 3,501 3,509 3,516	3,351 3,359 3,366	28,600 28,650 28,700 28,750	28,700 28,750 28,800	3,966 3,979 3,991 4,004	3,594 3,601 3,609 3,616	3,966 3,979 3,991 4,004	3,794 3,801 3,809 3,816	31,600 31,650 31,700 31,750	31,650 31,700 31,750 31,800	4,716 4,729 4,741 4,754	4,044 4,051 4,059 4,066	4,716 4,729 4,741 4,754	4,244 4,251 4,259 4,266
	25,900 25,950 26,000	3,524 3,531 3,539 3,546	3,174 3,181 3,189 3,196	3,524 3,531 3,539 3,546	3,374 3,381 3,389 3,396		28,900 28,950 29,000	4,016 4,029 4,041 4,054	3,624 3,631 3,639 3,646	4,016 4,029 4,041 4,054	3,824 3,831 3,839 3,846	31,800 31,850 31,900 31,950	31,850 31,900 31,950 32,000	4,766 4,779 4,791 4,804	4,074 4,081 4,089 4,096	4,766 4,779 4,791 4,804	4,274 4,281 4,289 4,296
* This c	olumn m	ust also	be used	by a q	ualifying	widow(e	er).								(Contin	ued on pa	age 66)

SCHEDULES A&B (Form 1040)

Schedule A—Itemized Deductions

(Schedule B is on back)

(Schedule B is on back)

OMB No. 1545-0074

2003

Attachment Sequence No. 07

Department of the Treasury Internal Revenue Service (99)

► Attach to Form 1040. ► See Instructions for Schedules A and B (Form 1040).

Name of the same of	. F		V
Name(s) shown or	1 Form	1 1040	Your social security number
Medical and Dental Expenses	1 2 3 4	Caution. Do not include expenses reimbursed or paid by others. Medical and dental expenses (see page A-2)	4
Taxes You Paid (See page A-2.)	5 6 7 8	State and local income taxes	
Interest You Paid (See page A-3.)	9 10 11	Add lines 5 through 8	9
Note. Personal interest is not deductible.	12 13 14	Points not reported to you on Form 1098. See page A-3 for special rules	14
Gifts to Charity If you made a gift and got a benefit for it, see page A-4.	15 16 17 18	Gifts by cash or check. If you made any gift of \$250 or more, see page A-4	18
Casualty and Theft Losses		Casualty or theft loss(es). Attach Form 4684. (See page A-5.)	19
Job Expenses and Most Other Miscellaneous Deductions		Unreimbursed employee expenses—job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See page A-5.) ▶	
(See page A-5.)	212223	Tax preparation fees	
 Other	24 25 26 27	Enter amount from Form 1040, line 35 \(\begin{array}{c cccc} 24 \\ & & & & & & & & & & & & & & & & & &	26
Miscellaneous Deductions		Other—from list on page A-6. List type and amount ▶	27
Total Itemized Deductions	28	Is Form 1040, line 35, over \$139,500 (over \$69,750 if married filing separately)? ☐ No. Your deduction is not limited. Add the amounts in the far right column for lines 4 through 27. Also, enter this amount on Form 1040, line 37. ☐ Yes. Your deduction may be limited. See page A-6 for the amount to enter.	28